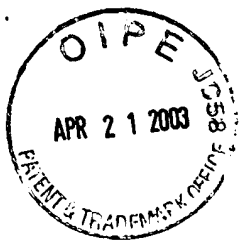


PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket Number. (Optional)
546322000100



In re Application of
Robert N. RICE and Bruce T. HARRISON

Application Number
10/081,646

Filed -
February 22, 2002

For LONG LASTING ANTI-ANGIOGENIC PEPTIDES

Group Art Unit
1634

Examiner
D. R. Gunter

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

- ☐ One month (37 CFR 1.17(a)(1)) \$
- ☐ Two months (37 CFR 1.17(a)(2)) \$
- ☒ Three months (37 CFR 1.17(a)(3)) \$930.00
- ☐ Four months (37 CFR 1.17(a)(4)) \$
- ☐ Five months (37 CFR 1.17(a)(5)) \$

- ☒ **Applicant claims small entity status.** See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: **\$465.00**
- ☐ A check in the amount of the fee is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account.
- ☒ **The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 03-1952. I have enclosed a duplicate copy of this sheet.**

I am the ☐ applicant/inventor
☐ assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
☒ attorney or agent of record.
☐ attorney or agent under 37 CFR 1.34(a).
Registration number if acting under 37 CFR 1.34(a) _____

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

April 21, 2003
Date

Michael R. Ward
Signature

MICHAEL R. WARD (Reg. No. 38,651)
Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of _____ forms are submitted. N/A